

**STATE OF TENNESSEE  
DEPARTMENT OF HEALTH**

**IN THE MATTER OF:**

**JULIE A. BLISS, R.N., A.P.R.N.  
RESPONDENT**

**POWELL, TENNESSEE  
A.P.R.N. CERTIFICATE NO. 12123  
R.N. LICENSE NO. 104141**

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**BEFORE THE TENNESSEE BOARD  
OF NURSING**

**DOCKET NO: 17.19-143493A**

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**AGREED ORDER**

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This matter came to be heard before the Tennessee Board of Nursing (the "Board"), pursuant to a Notice of Charges and Memorandum or Assessment of Civil Penalties issued against Respondent, Julie A. Bliss, R.N., A.P.R.N. (hereinafter "Respondent"). The Division of Health Related Boards of the Tennessee Department of Health (the "Department") was represented by Tracy L. Alcock, Assistant General Counsel. The Respondent was represented by Jennifer Pearson Taylor of London & Amburn, P.C.

The Board is responsible for the regulation and supervision of nurses licensed to practice in the State of Tennessee. *See Tennessee Nursing Practice Act, TENN. CODE ANN. § 63-7-101, et seq.* It is the policy of the Board to require strict compliance with the laws of this State and to apply the laws to preserve the quality of nursing services provided in Tennessee. It is the duty and responsibility of the Board to enforce the Tennessee Nursing Practice Act in such a manner as to promote and protect the public health, safety, and welfare in every practicable way, including disciplining nurses who violate the provisions of TENN. CODE ANN. § 63-7-101, *et seq.* and the Rules and Regulations promulgated by the Board and recorded in the *Official Compilation Rules and Regulations of the State of Tennessee* ("TENN. COMP. R. & REGS.").

Respondent, Julie A. Bliss, R.N., A.P.R.N., by her signature to this Agreed Order, expressly waives all further procedural steps and all rights to seek judicial review of or to challenge or contest the validity of this Agreed Order. Respondent agrees that presentation to and consideration of this Agreed Order by the Board for ratification and all matters divulged during that process shall not constitute unfair disclosure such that the Board shall be prejudiced to the extent that requires disqualification from hearing this matter should this Order not be ratified. Likewise, all matters, admissions and statements disclosed or exchanged during the attempted ratification process shall not be used against the Respondent in any subsequent proceeding unless independently entered into evidence or introduced as admissions.

Respondent is aware of each of Respondent's rights, including the right to a hearing on the charges and allegations, the right to appear personally and by counsel, the right to confront and cross-examine witnesses who would testify against Respondent, the right to testify and present evidence on Respondent's own behalf, as well as to the issuance of subpoenas to compel the attendance of witnesses and the production of documents, the right to contest the charges and allegations, and other rights which are accorded to Respondent pursuant to the Administrative Procedures Act and other applicable laws, including the right to seek reconsideration, review by the Chancery Court and appellate review.

In order to avoid the expense and uncertainty of a contested case hearing, Respondent admits truth to the facts contained herein. Respondent understands that by signing this Agreed Order Respondent is allowing the Board to issue order without further process. In the event the Board rejects this Agreed Order for any reason, it will be of no force or effect for either party.

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## **I. STIPULATIONS OF FACT**

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1. Respondent has been at all times pertinent hereto licensed by the Board as a Registered Nurse and Advanced Practice Registered Nurse in the State of Tennessee, as well as a certificate of fitness to prescribe, having been granted Registered Nurse license number 104141 on March 28, 1995, and having been granted Advanced Practice Registered Nurse license number 12123 on June 7, 2006, which both expire on July 31, 2018.
2. From around 2005 to around 2016, Respondent worked as a nurse for American Anesthesiology, which contracted Respondent to Tennova Comprehensive Pain Treatment Center ("Tennova"). During that time, Respondent worked at multiple Tennova locations, including North Knoxville Medical Center in Powell, Tennessee and Physicians Regional Medical Center in Knoxville, Tennessee.
3. Tennova was a hospital-based, referral-only pain management clinic owned by Tennova Healthcare. The Tennova clinic used a dictation-based medical record, rather than an electronic medical record system. Tennova did not provide primary care treatment. Tennova only accepted patients that have been referred from another licensed medical provider in the area. The patient was required to have proof that he or she maintained a physician/patient relationship with a primary care provider. A Tennova physician saw new patients at their initial visit. Tennova's physicians created the patient's treatment plan, and Tennova's nurse practitioners were primarily responsible for follow-up care. Tennova's nurse practitioners were supervised at all times by a physician.

4. As part of her job as a nurse practitioner at Tennova, Respondent conducted examinations of patients with a variety of mental and physical ailments and, in some situations, prescribed medication to those patients, including controlled substances.
5. The Department reviewed twelve (12) patient records seen by Respondent at Tennova for the time period of in or around January 2012 through in or around June 2015.
6. The treatment Respondent provided included prescribing narcotics and other controlled substances in amounts and/or for durations without documenting sufficient justification for such prescribing in the patients' charts.
7. Respondent prescribed controlled substances and other medications without documenting a physical examination at each visit and without documenting a clear, objective finding of a chronic pain source to justify the prescribing at each visit.
8. Respondent failed to document appropriate, individualized diagnoses and failed to document adequate support for diagnoses sufficient to justify the treatment rendered at each visit.
9. Respondent prescribed controlled substances and other medications without documenting a written treatment plan with regard to the use of controlled substances and other medications.
10. Respondent stopped working at Tennova in 2016, when Tennova ceased operations as a pain management treatment center that provided treatment by means of prescription medications.

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## II. GROUNDS FOR DISCIPLINE

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The facts stipulated to in the Stipulations of Fact are sufficient to establish that grounds for discipline of Respondent's advanced practice registered nurse license exist. Specifically, Respondent has violated the following statutes or rules which are part of the Tennessee Nursing Practice Act (TENN. CODE ANN. § 63-7-101, *et seq.*) and the TENN. COMP. R. & REGS. for which disciplinary action before and by the Board is authorized:

11. The facts stipulated in paragraphs six (6) through nine (9) constitute a violation of TENN. CODE ANN. § 63-7-115(a)(1)(F):

Is guilty of unprofessional conduct.

12. The facts stipulated in paragraphs six (6) through nine (9) constitute a violation of TENN. COMP. R. & REGS. § 1000-01-.13(1), which defines unprofessional conduct as:

(t) . . . [P]rescribing in a manner inconsistent with Rules 1000-04-.08 and 1000-04-.09.

13. The facts stipulated in paragraphs six (6) through nine (9) constitute a violation of TENN. COMP. R. & REGS. § 1000-04-.09, which provides that it shall be a prima facie violation of TENN. CODE ANN. § 63-7-115(a)(1)(F) for an Advanced Practice Registered Nurse, having proper authority to prescribe, to prescribe or dispense any drug to any individual unless the Advanced Practice Registered Nurse has completed and appropriately documented, for the person to whom a prescription is to be issued or drugs dispensed, certain prerequisites, including performing an appropriate history and physical examination.

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### III. POLICY STATEMENT

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The Tennessee Board of Nursing takes this action in order to protect the health, safety and welfare of the people in the State of Tennessee by ensuring that nurses safely prescribe controlled substances in an informed and knowing manner after completing an appropriate examination and assessment of patients. Furthermore, the Board takes this action in order to ensure that nurses sufficiently document their medical decision-making, particularly when it comes to prescribing controlled substances, to maintain adequate patient care and ensure continuity of patient care.

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### IV. ORDER

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**NOW THEREFORE**, Respondent, for the purpose of avoiding further administrative action with respect to this cause, agrees to the following:

14. The Tennessee Advanced Practice Registered Nurse license of Julie A. Bliss, R.N., A.P.R.N., Advanced Practice Registered Nurse license number 12123, is hereby placed on **PROBATION** for two (2) years, effective the date of entry of this Agreed Order by the Board. Respondent understands that said probation is an encumbrance on her A.P.R.N. license and that Respondent's multistate privilege to practice in any other party state is **void** during the period of probation. Respondent's privilege to practice shall be limited to the State of Tennessee until such time as Respondent's A.P.R.N. license is no longer probated. Respondent must petition for an Order of Compliance for the probation on Respondent's license to be lifted.

15. Respondent must enroll in and successfully complete within six (6) months of entry of this Order the following two medical courses:
- a. The two-day course entitled *PBI Medical Record Keeping Course Nurse Edition*, offered by Professional Boundaries Inc., or an equivalent course approved in advance in writing by the Board's Consultant.
  - b. The course entitled, *Prescribing Controlled Drugs*, offered by Vanderbilt University Medical Center, or an equivalent course approved in advance in writing by the Board's Consultant.
  - c. Within thirty (30) days after successful completion of the courses, Respondent shall mail or deliver proof of successful completion of the courses to the **Disciplinary Coordinator, The Division of Health Related Boards, Tennessee Department of Health, 665 Mainstream Drive, Nashville, Tennessee 37243**.
  - d. Continuing Education ("CE") course hours earned from attendance and completion of the courses shall be in addition to the CE hours required to maintain licensure.
16. Respondent agrees that, for the duration of the probation on her license, she shall not prescribe or dispense opioids or benzodiazepines for more than ninety (90) days in a twelve-month period to a majority of her patients.
17. Respondent agrees that, for the duration of the probation on her license, she shall decrease the volume of prescribed opioids, which shall be measured as follows:
- a. The unit of measurement to determine the decrease of opioid prescribing shall be in Morphine Equivalent Daily Dose ("MEDD") as determined by review of the Tennessee Controlled Substance Monitoring Database ("CSMD").

- b. Patients with the same combination of date of birth, first name, and last name on prescriptions shall be taken as the same person, and prescriptions for buprenorphine products that are FDA approved to treat addiction are not included.
  - c. Within sixty (60) days from the date of ratification of this order, Respondent shall not prescribe more than a daily Sixty (60) MEDD to any one of Respondent's patients at any point in time that she provides medical care. Should Respondent prescribe in excess of Sixty (60) MEDD as determined by review of the CSMD to any patient at any time after sixty (60) days from the date of ratification of this order, she shall be in violation of this Order.
  - d. Respondent shall demonstrate compliance by providing a quarterly copy of her CSMD Practitioner Report every ninety (90) days for the duration of the probation on her license. Each quarterly CSMD Practitioner Report shall reflect all controlled substance prescriptions Respondent has written for the previous ninety (90) days. The first quarterly report shall be due one hundred and fifty (150) days after the Board ratifies this Agreed Order. Respondent shall mail or deliver written proof of compliance with this CSMD Practitioner Report requirement to: **Disciplinary Coordinator, The Division of Health Related Boards, Tennessee Department of Health, 665 Mainstream Drive, Nashville, Tennessee 37243. The Board's consultant shall review said quarterly CSMD Practitioner Reports for compliance with this Order.**
18. Respondent agrees that within sixty (60) days from the date of ratification of this order, for the duration of the probation on her license, she shall not prescribe Soma (Carisoprodol) to any one of her patients at any point in time that she provides medical care. Should

Respondent prescribe Soma (Carisoprodol), as determined by review of the CSMD, to any patient at any time after sixty (60) days from the date of ratification of this order, she shall be in violation of this Order.

19. Respondent is assessed and must pay, pursuant to TENN. CODE ANN. § 63-7-115 and TENN. COMP. R. & REGS. 1000-01-.04(6)(a), twelve (12) Type "B" Civil Penalties representing the twelve (12) charts at issue in this case, in the amount of one hundred twenty-five dollars (\$125.00) each, for a total of **One Thousand Five Hundred Dollars (\$1,500.00)**.
20. Respondent must pay, pursuant to TENN. CODE ANN. § 63-7-115(d) and TENN. COMP. R. & REGS. 1000-01-.04(11), the actual and reasonable costs of prosecuting this case to the extent allowed by law, including all costs assessed against the Board by the Division's Bureau of Investigations in connection with the prosecution of this matter. These costs will be established by an Assessment of Costs prepared and filed by counsel for the Division. The maximum amount for the assessment of costs shall be **twelve thousand dollars (\$12,000.00)**.
21. Respondent understands that this is a formal disciplinary action and will be reported to the National Practitioner Data Bank (NPDB) and/or similar agency.
22. At the expiration of the two (2) year probationary period, Respondent becomes eligible to petition the Board for an Order of Compliance lifting the restrictions imposed by this Order. The Board shall lift the probation on Respondent's A.P.R.N. license provided Respondent has adhered to the terms of paragraphs fifteen (15) through twenty (20) of this Order.

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**V. NOTICE**

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23. Any and all costs shall be paid in full within twelve (12) months from the issuance of the Assessment of Costs. Payments shall be made in equal monthly installments by the fifth day of each month until paid in full, with payments to commence the fifth day of the month immediately following the issuance of the Assessment of Costs. Payment shall be made by **certified check, cashier's check, or money order**, payable to the **State of Tennessee**, Department of Health. Any and all payments shall be forwarded to the **Disciplinary Coordinator, The Division of Health Related Boards, Tennessee Department of Health, 665 Mainstream Drive, Nashville, Tennessee 37243**. A notation shall be placed on said check that it is payable for the costs of **Julie A. Bliss, R.N., A.P.R.N., Docket Number 17.19-143493A**.

This **AGREED ORDER** was approved by a majority of a quorum of the Tennessee Board of Nursing at a public meeting of the Board and signed this 17<sup>th</sup> day of November, 2017.

  
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Chair  
Tennessee Board of Nursing

**APPROVED FOR ENTRY:**

  
Julie A. Bliss, R.N., A.P.R.N.

Respondent

Tennessee R.N. No. 104141

Tennessee A.P.R.N. No. 12123

201 Fox Hunters Court

Powell, Tennessee 37849

*Respondent*

DATE

9/26/17

  
Jennifer Pearson Taylor (B.P.R. No. 021919)

London & Amburn, P.C.

607 Market Street, Suite 900

Knoxville, Tennessee 37902

(865) 637-0203 (Phone)

*Attorney for Respondent*

DATE

9/26/17

  
Tracy L. Alcock (B.P.R. #30079)

Assistant General Counsel

Office of General Counsel

Tennessee Department of Health

665 Mainstream Drive, 2nd Floor

Nashville, Tennessee 37243

(615) 253-9954

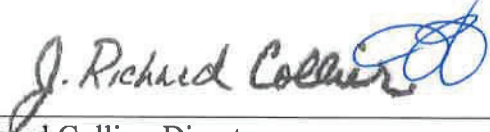
*Attorney for the State*

DATE

9/27/17

### CERTIFICATE OF FILING

This Order was received for filing in the Office of the Tennessee Secretary of State, Administrative Procedures Division, and became effective on the 17<sup>th</sup> day of November, 2017.



Richard Collier, Director  
Administrative Procedures Division

### CERTIFICATE OF SERVICE

The undersigned hereby certifies that a true and correct copy of this document has been served upon Respondent, via her attorney, Jennifer Pearson Taylor, London & Amburn, P.C., 607 Market Street, Suite 900, Knoxville, Tennessee 37902, by delivering same in the United States Mail, Certified Number 7016 2140 0000 8642 4937, return receipt requested, and United States First Class Postage Pre-Paid Mail, with sufficient postage thereon to reach its destination.

This 20<sup>th</sup> day of November, 2017.



Tracy L. Alcock  
Assistant General Counsel  
Tennessee Department of Health